REST AVAILABLE COPY

								Application or Docket Number					
	PATENT A	PPLICATIO Effect	RTA 2/SCH										
Effective October 1, 2000										$\frac{1}{1}$			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			32					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMB	BER EXTRA		ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			77 minus 20=		•	15	X\$ 9=		188	OR	X\$18=		
INDEPENDENT CLAIMS			9 minus 3 =		*	4		X40=	240	OR	X80=	•	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						1	ΓΟΤΑL	1094	OR	TOTAL			
CLAIMS AS AMENDED - PART II										_	OTHER		
(Column 1) (Column 2) (Column 3)							_ 5	MALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	ULTIPLE DEF	TIPLE DEPENDENT		T CLAIM		+135=			+270=			
										OR OR	TOTAL	<u></u>	
									TOTAL ADDIT. FEE				
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						_						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	- 01 4144			X40=		OR	X80=		
L	FIRST PRESE	ULTIPLE DEF	PENDENT CLAI				+135=		OR	+270=	-		
							L	TOTAL			TOTAL		
				10 I	01	(0-10)	AD	DIT. FEE		J O.,	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								ADDI			ADDI	
AMENDMENT C		REMAINING · AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	L	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Ind pendent	•	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	ULTIPLE DEI	DEPENDENT C			-	🕶		OH				
	Δ						Ŀ	⊦135 =		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
""	'If the "Highest Nu The "Highest Nun	mber Previously F nber Previously Pa	Paid For" IN TH aid For" (Total o	r Independ	is less tha dent) is the	an 3, enter "3." e highest number			propriate bo				